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CHEER
Respite Program
Parent/Guardian & Participant Handbook

Revised 12/2013
10/2014
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I. General Program Information

Easterseals Crossroads Respite Program provides rest and relaxation for family members and primary caregivers of individuals with special needs or disabilities.

Respite enhances personal and family health by providing necessary physical care and recreational activities while offering parents and caregivers a well-deserved break. The Respite Program is designed to serve families in a number of ways. Respite programs are free and available to the public.

CHEER – *Creating Healthy Environments and Enjoying Recreation* (CHEER) is offered monthly and is designed for individuals ages 18+. Participants that register for CHEER enjoy themed events such as, dance & sock-hops, game nights, movie nights, dinner parties and more. CHEER events typically take place on the 2nd Friday of every month. Reservations and registration are required.

ParentCare Packages – this program is an innovative concept that extends beyond the care of participants and affords family members or primary caregivers the opportunity to enjoy a recreational or leisure activity while your loved one is at a Respite event. ParentCare packages may consist of providing the means to enjoy a pleasant dining experience or other entertainment options within the Indianapolis area. *ParentCare packages are offered on an every other month basis.*

- Parents/caregivers understand that the ParentCare package is to be utilized on the night that Respite Care Services are provided by Easterseals Crossroads. It is understood that if the ParentCare package is misused in any way (i.e. not used on the designated night, used to purchase alcoholic beverages, etc.) this may prevent me/us from receiving other ParentCare packages in the future. It is clear that the misuse of ParentCare packages may result in the termination of these benefits for me/us and for others.
- **Please Note:** Gift cards will not be held until the end of the CHEER event, nor will the gift cards be mailed to families.
- **Gift cards will be distributed during drop-off only!**
- All questions regarding ParentCare packages should be directed to Angie Hilligoss, Manager of Respite Services. Angie can be reached at ahilligoss@eastersealscrossroads.org or 317-466-2001 x 2420.

II. Locations

CHEER – events take place at Easterseals Crossroads, 4740 Kingsway Drive, Indianapolis, IN 46205, and out in the community. Community events TBD.

III. Registration Forms

Current registration forms that are *thoroughly completed* are required for participants for all Respite events. In addition, we may require supplemental forms where deemed necessary. These include, but are not limited to, individualized education plans, behavior support plans, individualized treatment plans, seizure management plans, g-tube feeding plans, etc. Easterseals Crossroads may also request from parents/caregivers a Release of Information to seek additional information from school teachers, therapists, etc.

Individuals participating in the Respite Program will be screened to determine the level of care required, and to assess how the staff can best meet the needs of the participant. The level of care assigned will be on a trial basis and is determined by Easterseals Crossroads. Should the staff determine the needs of the participant have changed; a new level of care will be assigned.

Once all of the necessary documentation has been secured and a level of care has been established, an Easterseals Crossroads employee will contact you to schedule your first visit.

IV. Scheduling

CHEER

Once you are registered, you may begin scheduling each month to attend CHEER events. To schedule, please contact Brenda Dupree at 317-466-2006 or at bdupree@eastersealscrossroads.org.

- Flyers will be distributed on a monthly basis providing details of the event. This signifies open registration and you are free to contact Brenda to schedule.

V. Cancellation Policy

Families must notify Easterseals Crossroads by calling 317-466-2006 or 317-466-2001 x2420 within 3 hours if they are not able to keep their reservation for the Respite Care Services that the participant is registered for. If families no call/no show for an event, they will be required to put down a \$10.00 deposit for the participant and an additional \$5.00 deposit for each additional participant the next time they would like to make a reservation.

The deposit must be paid in full **BEFORE** the participant attends the next event and is **NON-REFUNDABLE**. If families do not cancel their reservation, they may be prohibiting other participants from utilizing Easterseals Crossroads Respite Care Services. In addition, families understand that if they no call/no show multiple times, they will be at risk of losing the opportunity to continue participating in the Respite Care Programs at Easterseals Crossroads.

VI. Schedule of Events

CHEER schedules vary depending on event each month.

VII. Required Items to Bring

CHEER:

- Diapers/wipes (if needed)
- Medication in original container (if needed)

What NOT to send CHEER participants with:

- Electronics
- Food

VIII. Drop-off & Pick-up | Policies & Procedures

Drop off

- Drop off starts at 6:00 pm; **participants must be to event by 6:45p** or else the family will risk being turned away from the program for the evening. *IF* you know you will be running 15 minutes late or longer to the program, please notify us immediately so that we can ensure proper staffing at the time of your arrival.
- Must be fed prior to the event (including g-tube feedings) unless dinner is served at the event.
- All medications (including PRN medications) must be checked in with staff during sign in.
- Pick up ParentCare packages at sign-in to event (every other month)

Pick up

- **Late arrival** - CHEER ends promptly at 9:30 p.m. and per the Respite Program policy, a second late arrival will result in a fee of \$5 for the first minute and \$1 for every minute thereafter. I understand that this fee must be paid in full to Easterseals Crossroads before the participant can attend a CHEER event again. In addition, I am aware that multiple late arrivals could result in the possible termination of Respite Program services in the future.
- **Intoxicated or impaired parent/caregiver** – it is policy at Easterseals Crossroads that no consumer will be allowed to leave an ESC facility, program or sponsored activity with a parent, guardian or caregiver who presents in a condition which may prevent them from assuring the consumers welfare.
 - Staff will use their best judgment in determining if a parent, guardian or caregiver presents in a condition which may prevent them from assuring the consumers welfare.
 - If deemed necessary, staff will contact another authorized user or emergency contact on the registration form. If they are not available, Yellow Cab will be contacted and paid for by Easterseals Crossroads.

IX. Behavior Policy and Consultation

In the event that a participant is posing a threat to his or her own safety or to the safety of others while at an event, the Respite staff will request a behavioral consultation from behavior support staff at Easterseals Crossroads. Behavior support staff will work with Respite staff to provide behavior recommendations to aid in reducing the target behavior(s). If the participant's behavior does not improve with the assistance of behavioral support, the participant may need to be withdrawn from the Respite program.

X. Specific Medical Needs

Feeding Tubes

Participants who require the use of a feeding tube will be allowed to participate in Respite events, but feedings will not be provided unless medical documentation indicates it is medically necessary during the hours of the Respite event. Should it be deemed medically necessary, the parent/caregiver will need to submit a supplemental form to Easterseals Crossroads with the specifics of the feeding. Supplemental forms can be obtained by contacting Angie Hilligoss at 317-466-2001 x2420.

Food Allergies and Special Food Preparation Requirements

If the registered participant has a significant food or environmental allergy, please contact Easterseals Crossroads (Angie– see above) to secure a supplemental form. The supplemental form will help us to understand the specifics of the allergy and the procedures to follow in case of an allergic reaction. Respite staff will do their best to avoid common food allergies such as nuts and gluten, but may not be able to accommodate all allergies at every event. It is best to always send a "back-up" snack for the participant to enjoy during snack time if they have specific food allergies.

If the registered participant has specific food preparation needs, please contact Easterseals Crossroads (Angie– see above) to secure a supplemental form. The supplemental form will help us to better understand the specific dietary needs of the participant and to ensure proper nutrition during Respite events.

Please note: Staff will not have access to supplies such as thickening solutions for liquids; please plan to provide the necessary supplies if needed.

Seizures

A seizure management plan and/or a supplemental form should be completed for all participants with a seizure disorder. Supplemental forms can be obtained from Angie (see above for contact info). If the participant has emergency seizure medication, this will need to be brought to each Respite event and registered with staff at sign-in to the event.

Medication Administration

The process for handling and administering medications must be well structured and carefully followed in order to ensure that the interests of the participant and the providers are best served. When possible, participant, caregiver and physician should try to minimize the need for medication while participating in Easterseals Crossroads programs. Medicines ordered twice a day should normally be given before and after, rather than during, respite hours. Medications ordered to be given three times daily also may be planned so that they are given while respite participant is at home. However, in some cases, administration of medications during program hours is unavoidable.

Medical Consent

CHEER Team Leaders will administer medication only if the parent or legal guardian has provided written consent on the Medication Consent and Log; the medication is available in an original labeled prescription or manufacturer's container that meets the safety check requirements.

1. Prescription Medication

- Parents or legal guardians will provide the medication in the original, child-resistant container that is labeled by a pharmacist with the participants name, the name and strength of the medication;
- The date the prescription was filled;
- The name of the healthcare provider who wrote the prescription;
- The medication's expiration date;
- And administration, storage, and disposal instructions.

2. Nonprescription Medication

- Parents or legal guardians will provide the medication in the original container
- The medication will be labeled with the participants first and last name;
- Specific, legible instructions for administration and storage supplied by the manufacturer;
- Name of the healthcare provider who recommended the medication for the participant.

XI. Emergency or Crisis Situations

Parents & caregivers are expected to always be available via cell phone while their loved one is with us at a Respite event. If the primary parent or caregiver is not able to be reached, staff will contact the emergency contacts listed on the registration form. If emergency contacts cannot be reached, Easterseals Crossroads reserves the right to contact emergency medical help (911) for assistance.

- **Crisis or emergencies could include situations such as (but not limited to):** fire, tornado, late pick up from a Respite event, medical concerns, or behavioral concerns.

XII. Compliments/Concerns/Questions?

Please direct all compliments/concerns/questions to Angie Hilligoss, Manager of Respite Services. Angie can be reached at 317-466-2001 X 2420 or ahilligoss@eastersealscrossroads.org.



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**Acknowledgement of Receipt
Parent/Guardian & Participant Handbook – Respite Services**

I, _____, the parent/guardian of _____
(Parent/Guardian Name) (Primary Participant's Name)

sign below acknowledging the receipt of the Parent/Guardian & Participant Handbook and agree to comply with the policies and procedures set in place. I understand that it is my responsibility to read through and familiarize myself with the handbook and to ask questions about anything I do not understand.

Signature

Date

